Attachment 1

Application No.:

**Application for Institutional Exchanges from Sino-US Joint Translational Hepatology Research Center**

Name:

Professional title：

Institution:

The Translational Hepatology Institute at Capital Medical University

Jun, 2019

**Instructions**

1. The present program is hosted by both Sino-US Joint Translational Hepatology Research Center and US-Sino Joint Translational Hepatology Research Center, referred as “Institution” in this document.
2. Please provide your highest educational diploma or technical certification you have. Work experience covers from applicant’s first job to current position, including continuing education and study experiences.
3. The applicant’s own employer takes the ultimate responsibility to assure the authenticity and correctness of the information applicant provides. Without the approval stamp from the applicant’s HR department, the application would be voided.
4. Please provide a copy of applicant’s birth certification and technical certification.
5. Electronic filing is available under the tab “科研项目（Research Project） at <http://www.igandan.com>. Please complete the application online as instructed.
6. A complete and signed copy of all your application materials are also required and should submitted by mail to the address below,

*Xun ZHANG*

*16 S. 3rd Road West,*

*Suite 901, Building #3, Soubao Business Center*

*Fengtai District, Beijing, China*

*Zip Code 100068*

*Phone: 15210728153*

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1. A recent digital self-portrait photo should be included with your application.Type in or print of your answers in black ink.

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| --- | --- | --- | --- | --- | --- | --- |
| Name |  | Gender |  | Nationality |  | Picture (one inch) |
| Date of Birth |  / /  | Professional title |  |
| Educational history   |  | Diploma |  | Administrative posts |  |
| No. of Birth Certification |  |
| Passport No. |  | Specialty |  |
| Institution name |  | English ability |  |
| Department |  | Work experience |  |
| Graduate School |  |
| Research interest |  |
| Type of exchange | □1year |
| Specialty | 1 |  | Prior specialty  | 1 |  |
| 2 |  | 2 |  |
| Institution address |  |
| Zip code |  | Fax number |  |
| Office Phone  |  | Home phone  |  |
| Cell phone  |  | Email: |  |
| Others(Optional) | Your QQ number： Wechat number： |
| Prior training history: |
| Presently undertaken national or local research projects (title, levels, funding, completion time, etc) |
| Domestic and foreign academic assignments: |
| Main academicals achievements (no more than 300 words) |
| The main academic publishes in recent five years: (no more than 10) |
| Research interests and study aims: |
| I carefully read and promise all the information I provide is accuracy and authenticity. Signature： Date:  |
| The comments of institution of applicant (including whether assure the expense for abroad study, the accuracy and authenticity of provided information, whether agree applicant to study abroad):SignatureHuman resources: (seal) Date:  |